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OIP E TRANSMITTAL FORM FEB 02 2006 (to be used for all correspondence after initial filing) Total Number of Pages in This Submission	Application Number	10/715,657
	Filing Date	11/18/2003
	First Named Inventor	Nady E. Nady
	Art Unit	N/A
	Examiner Name	N/A
Attorney Docket Number		RWJ 05-69

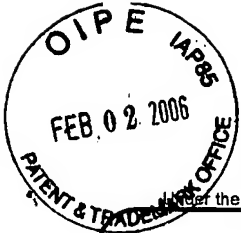
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	University of Medicine and Dentistry of New Jersey, Office of Patents and Licensing		
Signature	<i>Barbara V. Maurer</i>		
Printed name	Barbara V. Maurer		
Date	January 30, 2006	Reg. No.	31,278

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Felicia L. Tillman</i>		
Typed or printed name	Felicia L. Tillman	Date	January 30, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

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INDICATION FORM**

Application Number	10/715,657
Filing Date	11/18/2003
First Named Inventor	Nady E. Nady
Title	Device for Sealing a Body Canal
Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	RWJ 05-69

I hereby revoke all previous powers of attorney given in the above-identified application.

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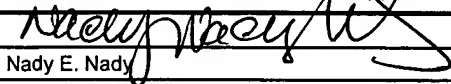
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	11/19/06
Name	Nady E. Nady	Telephone	732-235-6631
Title and Company	University of Medicine and Dentistry of New Jersey		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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